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** CONTINUING DATA *****

NONE SAB

** FOREIGN APPLICATIONS *****

NONE SAB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
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Verified and Acknowledged Examiner's Signature: <u>SAB</u> Initials: <u>SAB</u>	QC	12	29	4

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TITLE

Cryogenic current limiting fuse

FILING FEE RECEIVED 1148	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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